

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **APACHE COUNTY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL45-7** **# BEDS:** **5**

NAME: **KACHINA**

951 EAST KACHINA, APACHE COUNTY AZ 85219

(520) 836-1239

FAX: (520) 863-7757

OWNER/OPERATOR: AGAINST ABUSE, INC. DBA LA CASITA DE PAZ

ADMINISTRATOR: PATRICIA GRIFFEN

119 FLORENCE STREET, CASA GRANDE AZ 85222

(520) 836-1239

FAX: (520) 863-7757

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **APACHE JUNCTION**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL205-456** **# BEDS:** 10

NAME: **CHARLES YOUTH DEV.CENTER**

3731 SOUTH WICKIUP ROAD, APACHE JUNCTION AZ 85029

(623) 584-0349

FAX: (623) 546-0964

OWNER/OPERATOR: GOLDEN STATE HUMAN DEV. COALITION

ADMINISTRATOR: GREGORY L. JOHNSON

3731 SOUTH WICKIUP ROAD, APACHE JUNCTION AZ 85029

(623) 584-0349

FAX: (623) 546-0964

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: ARIZONA CITY

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2153 # BEDS: 12
NAME: PARK PLACE OUTREACH & COUNSELING CENTERS INC
13626 DEL RIO DRIVE, ARIZONA CITY AZ 85223
(520) 466-6630
FAX: (520) 466-8851

OWNER/OPERATOR: PARK PLACE OUTREACH & COUNSELING CENTERS, INC.

ADMINISTRATOR: LINEFELTER, RAYMOND
P O BOX 2779, ARIZONA CITY AZ 85223
(520) 466-6630
FAX: (520) 466-8851
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: AVONDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-68 **# BEDS:** 6

NAME: RANCH

3241 NORTH 103RD AVENUE, AVONDALE AZ 85303

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **BENSON**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL55-22** **# BEDS:** **6**

NAME: **BARNEY'S**

1573 EAST BARNEY LANE, BENSON AZ 85602

(520) 586-2714

FAX: (520) 586-9634

OWNER/OPERATOR: BARNEY'S PROFESSIONAL HOME

ADMINISTRATOR: PAULA BARNEY

1573 EAST BARNEY LANE, BENSON AZ 85602

(520) 586-2714

FAX: (520) 586-9634

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: CASA GRANDE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL45-6 **# BEDS:** 16

NAME: 9TH STREET

995 NORTH ARIZOLA ROAD, CASA GRANDE AZ 85222

(520) 836-1239

FAX: (520) 863-7757

OWNER/OPERATOR: AGAINST ABUSE, INC. DBA LA CASITA DE PAZ

ADMINISTRATOR: PATRICIA GRIFFEN

119 FLORENCE STREET, CASA GRANDE AZ 85222

(520) 836-1239

FAX: (520) 863-7757

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: CASA GRANDE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2863 # BEDS: 6

NAME: NEW HORIZON YOUTH HOMES INC

467 EAST DRAGON SPRINGS DRIVE, CASA GRANDE AZ 85222

(480) 722-2730

FAX: (480) 664-4296

OWNER/OPERATOR: THOMAS B GRANADO

ADMINISTRATOR: GRANADO, THOMAS

PO BOX 2754, CHANDLER AZ 85244

(480) 722-2730

FAX: (480) 664-4296

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: CHANDLER

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-70 # BEDS: 5

NAME: HARBOR

1208 WEST MARLBORO, CHANDLER AZ 85224

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: CHANDLER

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-64 # BEDS: 5

NAME: HAZEL

701 WEST TEMPLE, CHANDLER AZ 85224

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: CHANDLER

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1873 # BEDS: 7
NAME: NEW HORIZON YOUTH HOMES INC/ NEW HORIZON
 760 EAST STOTTLER, CHANDLER AZ 85225
 (480) 722-2730
 FAX: (480) 664-4296

OWNER/OPERATOR: THOMAS B. GRANADO
ADMINISTRATOR: GRANADO, THOMAS
P O BOX 2754, CHANDLER AZ 85244
(480) 722-2730
FAX: (480) 664-4296
EMAIL: TOM@NHYH.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
 (602) 364-2600
 EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: CHANDLER

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2338 # BEDS: 7
NAME: NEW HORIZON YOUTH HOMES INC/ PARK HOUSE
 795 WEST PARK AVENUE, CHANDLER AZ 85225
 (480) 722-2730
 FAX: (480) 664-4296

OWNER/OPERATOR: NEW HORIZON YOUTH HOMES, INC.

ADMINISTRATOR: GRANADO, THOMAS
P O BOX 2754, CHANDLER AZ 85244
(480) 722-2730
FAX: (480) 664-4296
EMAIL: TOM@NHYH.ORG

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: CHANDLER

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1946 # **BEDS:** 38
NAME: REMUDA RANCH HOLDING CO/ REMUDA LIFE PROGRAM
111 SOUTH HEARTHSTONE WAY, CHANDLER AZ 85226
(928) 684-3913
FAX: (928) 684-4661

OWNER/OPERATOR: REMUDA RANCH HOLDING CO./REMUDA RANCH CTR. FOR AN
ADMINISTRATOR: ELLIS, JOHN
ONE EAST APACHE STREET, WICKENBURG AZ 85390
(928) 684-3913
FAX: (928) 684-4661
EMAIL: JOHN.ELLIS@REMUDARANCH.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: COOLIDGE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1159 # BEDS: 12
NAME: PARK PLACE OUTREACH & COUNSELING CENTERS INC
 13712 NORTH PRESTON DRIVE, COOLIDGE AZ 85228
 (520) 466-8850
 FAX: (520) 466-8851

OWNER/OPERATOR: PARK PLACE OUTREACH & COUNSELING CENTERS INC.

ADMINISTRATOR: LINEFELTER, RAYMOND
P.O. BOX 2779, ARIZONA CITY AZ 85223
(520) 466-8850
FAX: (520) 466-8851

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **DEWEY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2374** **# BEDS:** 8
NAME: **DAYBREAK BEHAVIORAL RESOURCES LLC/BLUE RIDGE MANO**
14410 EAST BLUE RIDGE ROAD, DEWEY AZ 86327
(928) 632-8078
FAX: (928) 632-8082

OWNER/OPERATOR: DAYBREAK BEHAVIORAL RESOURCES LLC
ADMINISTRATOR: HALTERMAN, DONNA
P O BOX 1860, DEWEY AZ 86327
(928) 632-8078
FAX: (928) 632-8082
EMAIL: MELBRINKHOFF@YAHOO.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: DEWEY

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2163 # **BEDS:** 8
NAME: DAYBREAK BEHAVIORAL RESOURCES L L C/ SMOKI TRAIL
9435 SMOKI TRAIL, DEWEY AZ 86327
(928) 632-5806
FAX: (928) 632-0521

OWNER/OPERATOR: DAYBREAK BEHAVIORAL RESOURCES LLC

ADMINISTRATOR: KENNY, THOMAS

P.O. BOX 3720, FLAGSTAFF AZ 86003

(928) 632-5806

FAX: (928) 632-0521

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: DEWEY

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1122 # BEDS: 9
NAME: MINGUS MOUNTAIN ACADEMY/ FARRINGTON HOME
 100 DEWEY ROAD, DEWEY AZ 86327
 (602) 335-2000
 FAX: (602) 249-1311

OWNER/OPERATOR: MINGUS MOUNTAIN ESTATE RESIDENTIAL CENTER INC.

ADMINISTRATOR: BANKEN, CHRIS
P O BOX 26485, PRESCOTT VALLEY AZ 86312
(602) 335-2000
FAX: (602) 249-1311
EMAIL: CBANKEN@MMAAZ.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: EL MIRAGE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2998 # BEDS: 7

NAME: UNITY GROUP HOME, LLC
12406 WEST SURREY AVENUE, EL MIRAGE AZ 85335
(480) 202-2972
FAX: (000) 000-0000

OWNER/OPERATOR: UNITY GROUP HOME, LLC

ADMINISTRATOR: EDWARDS, STEPHANIE
70 SOUTH VAL VISTA SOUTH DRIVE SUITE A3, GILBERT AZ 85296
(480) 202-2972
FAX: (000) 000-0000

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: ELFRIDA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL115-485 # **BEDS:** 23
NAME: **FRED D. JONES HOUSE**
 2491 EAST JEFFERSON ROAD, ELFRIDA AZ 85610
 (520) 795-5961
 FAX: (520) 299-8868

OWNER/OPERATOR: VISIONQUEST NATIONAL, LTD.

ADMINISTRATOR: ANTHONY ZASA
3571 EAST RIVER ROAD, TUCSON AZ 85718
(520) 795-5961
FAX: (520) 299-8868
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: ELFRIDA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL115-184 **# BEDS:** 96

NAME: WILDERNESS CAMP (WAGON TRAIN)

2491 E. JEFFERSON ROAD WILDERNESS CAMP, ELFRIDA AZ 85610

(520) 795-5961

FAX: (520) 299-8868

OWNER/OPERATOR: VISIONQUEST NATIONAL, LTD.

ADMINISTRATOR: ANTHONY ZASA

3571 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2907** **# BEDS:** 8
NAME: **CATHOLIC CHARITIES COMMUNITY SERVICES INC**
306 SOUTH O'LEARY, FLAGSTAFF AZ 86001
(602) 285-1999
FAX: (602) 285-0311

OWNER/OPERATOR: CATHOLIC CHARITIES COMMUNITY SERVICES INC
ADMINISTRATOR: SCHMIDT, KRISTEN
4747 NORTH 7TH AVENUE, PHOENIX AZ 85013
(602) 285-1999
FAX: (602) 285-0311
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL90-113** **# BEDS:** 8

NAME: **CLAY STREET SHELTER**
823 WEST CLAY, FLAGSTAFF AZ 86001
(520) 670-9040
FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.

ADMINISTRATOR: NANCY PANICO
630 EAST 9TH STREET, TUCSON AZ 85705
(520) 670-9040
FAX: (520) 670-1753
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2468** **# BEDS:** 8
NAME: **DAYBREAK BEHAVIORAL RESOURCES L L C**
6070 EAST TREADWAY TRAIL, FLAGSTAFF AZ 86004
(928) 526-1499
FAX: (928) 526-1151

OWNER/OPERATOR: DAYBREAK BEHAVIORAL RESOURCES LLC

ADMINISTRATOR: KENNY, THOMAS
P O BOX 3720, FLAGSTAFF AZ 86003
(928) 526-1499
FAX: (928) 526-1151

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1927** **# BEDS:** 8
NAME: **DAYBREAK BEHAVIORAL RESOURCES, SILVER SADDLE RANCH**
8800 NORTH MARY'S DRIVE, FLAGSTAFF AZ 86004
(928) 526-0997
FAX: (928) 526-0284

OWNER/OPERATOR: DAYBREAK BEHAVIORAL RESOURCES LLC

ADMINISTRATOR: KENNY, TOM
P.O. BOX 3720, FLAGSTAFF AZ 86002
(928) 526-0997
FAX: (928) 526-0284
EMAIL: TWKENNY@EARTHLINK.NET
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL215-491** **# BEDS:** 6

NAME: **NEW HORIZON**

2309 NORTH CENTER #B, FLAGSTAFF AZ 86004

(928) 226-1765

FAX: (928) 527-4447

OWNER/OPERATOR: NEW HORIZON CHRISTIAN ACADEMY, INC.

ADMINISTRATOR: DANIEL WILLIAMSON

2016 NORTH 4TH STREET, FLAGSTAFF AZ 86004

(928) 226-1765

FAX: (928) 527-4447

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1709** **# BEDS:** 38
NAME: **NORTHLAND FAMILY HELP CENTER/ HALO HOUSE**
CONFIDENTIAL PURSUANT TO A R SOUTH 36-3009, FLAGSTAFF AZ 8
(928) 527-1700
FAX: (928) 774-5809

OWNER/OPERATOR: NORTHLAND FAMILY HELP CENTER
ADMINISTRATOR: CORDAIN, CONSTANCE
2724 EAST LAKIN DRIVE #7, FLAGSTAFF AZ 86004
(928) 527-1700
FAX: (928) 774-5809
EMAIL: SBURKHALTER@NORTHLANDFAMILY.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **FLAGSTAFF**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL108-201** **# BEDS:** 5

NAME: **TEEN TOWN**

17600 SOUTH NORTH LODGE DRIVE, FLAGSTAFF AZ 86017

(928) 286-2277

FAX: (928) 286-2277

OWNER/OPERATOR: TEEN TOWN OF ARIZONA U.S.A

ADMINISTRATOR: JOHN & ANN BOOTH

17600 NORTH LODGE DRIVE, MUNDS PARK AZ 86017

(928) 286-2277

FAX: (928) 286-2277

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GILBERT**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1914** **# BEDS:** 5
NAME: **TRI / PHASE GROUP HOME INC**
1575 EAST BETSY, SUITE D, GILBERT AZ 85296
(520) 568-3269
FAX: (520) 568-4269

OWNER/OPERATOR: TRI / PHASE GROUP HOME
ADMINISTRATOR: MCKINNEY, LUCIAN
3125 SOUTH LAGUNA DRIVE, CHANDLER AZ 85248
(520) 568-3269
FAX: (520) 568-4269
EMAIL: LJROMEY@AOL.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-51** **# BEDS:** 10

NAME: **ANNE'S HAVEN**
5816 NORTH 72ND DRIVE, GLENDALE AZ 85303
(623) 931-9300
FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS
5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301
(623) 931-9300
FAX: (623) 931-9822
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: GLENDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-147 **# BEDS:** 10

NAME: **BARBARA HOUSE**

5763 WEST BARBARA AVENUE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-140** **# BEDS:** 10

NAME: **CAMELBACK HOUSE**

8608 WEST DENTON DRIVE, GLENDALE AZ 85305

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1737** **# BEDS:** **5**
NAME: **CHERYL HOUSE**
4541 WEST CHERYL DRIVE, GLENDALE AZ 85302
(623) 435-7279
FAX: (623) 435-6962

OWNER/OPERATOR: CHRISTINE FARRAR
ADMINISTRATOR: FARRAR, CHRISTINE
P. O. BOX 14594, PHOENIX AZ 85063
(623) 435-7279
FAX: (623) 435-6962
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL116-162** **# BEDS:** 48

NAME: **CHILD CRISIS CENTER**

6805 NORTH 81ST AVENUE, GLENDALE AZ 85303

(623) 848-8863

FAX: (623) 848-8864

OWNER/OPERATOR: WEST VALLEY CHILD CRISIS CENTER

ADMINISTRATOR: CHRISTINE CLOUSE

6805 NORTH 81ST AVENUE, GLENDALE AZ 85303

(623) 848-8863

FAX: (623) 848-8864

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-203** **# BEDS:** 10

NAME: **CLAREMONT HOUSE**

7580 W. CLAREMONT STREET, GLENDALE AZ 85303

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL51-17** **# BEDS:** **5**

NAME: **CORRINE**

5148 WEST DAHLIA, GLENDALE AZ 85304

(602) 942-7050

FAX: (602) 298-6655

OWNER/OPERATOR: PLACES OF THE HEART STEP-N-STONES, INC.

ADMINISTRATOR: YVONNE GRUBBS

82 EAST CANTERBURY COURT, PHOENIX AZ 85068

(602) 942-7050

FAX: (602) 298-6655

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-57** **# BEDS:** 10

NAME: **CROSSROADS**

11109 NORTH 45TH DRIVE, GLENDALE AZ 85304

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-56** **# BEDS:** 5

NAME: **DESERT COVE**

7258 WEST STATE AVE, GLENDALE AZ 85303

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: GLENDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-65 **# BEDS:** 5

NAME: **DIANA**

5331 WEST DIANA, GLENDALE AZ 85302

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL75-78** **# BEDS:** 10

NAME: **ESTHER'S GARDEN**
5038 WEST ACOMA, GLENDALE AZ 85306
(623) 582-2349
FAX: (623) 582-4674

OWNER/OPERATOR: GARDEN HOUSE, INC.

ADMINISTRATOR: SUE MAVROLAS
5323 WEST WESTWIND DRIVE, GLENDALE AZ 85310
(623) 582-2349
FAX: (623) 582-4674
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-138** **# BEDS:** 10

NAME: **FLYNN HOUSE**

7773 WEST FLYNN LANE, GLENDALE AZ 85303

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-59** **# BEDS:** 10

NAME: **FOUR SEASONS**

11208 NORTH 58TH DRIVE, GLENDALE AZ 85303

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-142** **# BEDS:** 10

NAME: **GEORGIA HOUSE**

7956 WEST GEORGIA, GLENDALE AZ 85303

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL115-511** **# BEDS:** 20

NAME: **GLENDALE HOUSE**

5125 WEST MYRTLE AVENUE, GLENDALE AZ 85301

(520) 795-5961

FAX: (520) 299-8868

OWNER/OPERATOR: VISIONQUEST NATIONAL, LTD.

ADMINISTRATOR: ANTHONY ZASA

3571 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: GLENDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-144 **# BEDS:** 10

NAME: **GLENN HOUSE**
7122 NORTH 81ST DRIVE, GLENDALE AZ 85303
(623) 842-4323
FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR
10555 NORTH 58TH DRIVE, GLENDALE AZ 85302
(623) 842-4323
FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-146** **# BEDS:** 10

NAME: **GREENWAY HOUSE**

15222 NORTH 66TH DRIVE, GLENDALE AZ 85306

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL103-206** **# BEDS:** 10

NAME: **MANZANITA HOUSE**
6009 WEST MANZANITA, GLENDALE AZ 85302
(623) 842-4323
FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE GROUP HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR
10555 NORTH 58TH DRIVE, GLENDALE AZ 85302
(623) 842-4323
FAX: (623) 842-4349
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-452** **# BEDS:** 10

NAME: **MENADOTA HOUSE**

3622 WEST MENADOTA DRIVE, GLENDALE AZ 85308

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL103-137** **# BEDS:** 10

NAME: **MOUNTAIN VIEW**

6408 WEST MOUNTAIN VIEW, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE GROUP HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-67** **# BEDS:** **5**

NAME: **NEW HORIZONS**

7641 NORTH 46TH AVENUE, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-487** **# BEDS:** 10

NAME: **NORTHVIEW HOUSE**
4520 WEST NORTHVIEW, GLENDALE AZ 85301
(623) 931-9300
FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS
5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301
(623) 931-9300
FAX: (623) 931-9822
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: GLENDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-141 **# BEDS:** 10

NAME: OCOTILLO HOUSE

8910 WEST OCOTILLO DRIVE, GLENDALE AZ 85305

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-453** **# BEDS:** 10

NAME: **PUGET HOUSE**

5814 WEST PUGET AVE., GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL75-80** **# BEDS:** 10

NAME: **REBECCA'S GARDEN**
3610 WEST MISTY LANE, GLENDALE AZ 85310
(623) 582-2349
FAX: (623) 582-4674

OWNER/OPERATOR: GARDEN HOUSE, INC.

ADMINISTRATOR: SUE MAVROLAS
5323 WEST WESTWIND DRIVE, GLENDALE AZ 85310
(623) 582-2349
FAX: (623) 582-4674
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-145** **# BEDS:** 10

NAME: **ROVEY HOUSE**

6169 NORTH 88TH LANE, GLENDALE AZ 85306

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **GLENDALE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL75-79** **# BEDS:** 10

NAME: **WEST WIND HOUSE**

5323 WEST WESTWIND DRIVE, GLENDALE AZ 85310

(623) 582-2349

FAX: (623) 582-4674

OWNER/OPERATOR: GARDEN HOUSE, INC.

ADMINISTRATOR: SUE MAVROLAS

5323 WEST WESTWIND DRIVE, GLENDALE AZ 85310

(623) 582-2349

FAX: (623) 582-4674

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **HEREFORD**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2206** **# BEDS:** 8
NAME: **MARY'S MISSION AND DEVELOPMENT CENTER**
8360 SOUTH HIGHWAY 92, HEREFORD AZ 85615
(520) 417-2115
FAX: (520) 417-2114

OWNER/OPERATOR: MARY'S MISSION DEVELOPMENTAL CENTER

ADMINISTRATOR: LACEY, WILLIAM
345 TAYLOR DRIVE, SIERRA VISTA AZ 85635
(520) 417-2115
FAX: (520) 417-2114
EMAIL: WLACEY@C2I2.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **HUACHUCA CITY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL90-112** **# BEDS:** 18
NAME: **COCHISE COUNTY CHILDREN'S CENTER**
721 GONZALES BLVD, HUACHUCA CITY AZ 85616
(520) 670-9040
FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.
ADMINISTRATOR: NANCY PANICO
630 EAST 9TH STREET, TUCSON AZ 85705
(520) 670-9040
FAX: (520) 670-1753
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY
CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **KINGMAN**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2660** **# BEDS:** 8
NAME: **DAYBREAK BEHAVIORAL RESOURCES, L L C**
3240 HUALAPAI MOUNTAIN ROAD, KINGMAN AZ 86401
(928) 526-0779
FAX: (928) 526-0784

OWNER/OPERATOR: DAYBREAK BEHAVIORAL RESOURCES LLC

ADMINISTRATOR: KENNY, THOMAS
P.O. BOX 3720, FLAGSTAFF AZ 86003
(928) 526-0779
FAX: (928) 526-0784
EMAIL: TWKENNY@EARTHLINK.NET
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1130 # BEDS: 12

NAME: ANASAZI FOUNDATION

1424 SOUTH STAPLEY DRIVE, MESA AZ 85204

(480) 892-7403

FAX: (480) 892-6701

OWNER/OPERATOR: ANASAZI FOUNDATION

ADMINISTRATOR: MERCHANT, MICHAEL

1424 SOUTH STAPLEY DRIVE, MESA AZ 85204

(480) 892-7403

FAX: (480) 892-6701

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL117-189 # BEDS: 10

NAME: CARMEL HOUSE

9247 CARMEL AVENUE, MESA AZ 85208

(480) 218-1644

FAX: (480) 218-4219

OWNER/OPERATOR: YOUTH ENLIGHTENMENT SYSTEM, INC.

ADMINISTRATOR: JANET PINAIRE

9247 CARMEL AVENUE, MESA AZ 85208

(480) 218-1644

FAX: (480) 218-4219

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL40-1 **# BEDS:** 10

NAME: CONTESSA

2904 EAST CABALLERO STREET, MESA AZ 85213

(480) 792-0265

FAX: (480) 792-0266

OWNER/OPERATOR: A&A COTTAGES

ADMINISTRATOR: ELIZABETH MAYER

749 WEST 2ND STREET, MESA AZ 85214

(480) 792-0265

FAX: (480) 792-0266

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL68-194 # BEDS: 8

NAME: ELLIS

4645 EAST ELLIS, MESA AZ 85205

(480) 833-5746

FAX: (480) 649-3775

OWNER/OPERATOR: DARA II, INC.

ADMINISTRATOR: CYNDEE PRESUTTI

3015 NORTH 64TH STREET, MESA AZ 85215

(480) 833-5746

FAX: (480) 649-3775

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL117-190 # BEDS: 10

NAME: EMELITA

8566 EAST EMELITA, MESA AZ 85207

(480) 218-1644

FAX: (480) 218-4219

OWNER/OPERATOR: YOUTH ENLIGHTENMENT SYSTEM, INC.

ADMINISTRATOR: JANET PINAIRE

9247 CARMEL AVENUE, MESA AZ 85208

(480) 218-1644

FAX: (480) 218-4219

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL68-458 # BEDS: 10

NAME: FOUNTAIN HOUSE

1953 EAST FOUNTAIN, MESA AZ 85203

(480) 833-5746

FAX: (480) 649-3775

OWNER/OPERATOR: DARA II, INC.

ADMINISTRATOR: CYNDEE PRESUTTI

3015 NORTH 64TH STREET, MESA AZ 85215

(480) 833-5746

FAX: (480) 649-3775

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL92-123 # BEDS: 6

NAME: HAMPTON HOUSE
143 EAST HAMPTON, MESA AZ 85204
(480) 964-8721
FAX: (480) 837-5955

OWNER/OPERATOR: OUTREACH SERVICES

ADMINISTRATOR: KIMBERLY MURPHY
803A WEST MAIN STREET, PAYSON AZ 85541
(480) 964-8721
FAX: (480) 837-5955

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL92-122 # BEDS: 8

NAME: HARMONY HOUSE

1044 EAST HARMONY, MESA AZ 85204

(480) 964-8721

FAX: (480) 837-5955

OWNER/OPERATOR: OUTREACH SERVICES

ADMINISTRATOR: KIMBERLY MURPHY

803A WEST MAIN STREET, PAYSON AZ 85541

(480) 964-8721

FAX: (480) 837-5955

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL102-136 # BEDS: 74

NAME: HIGLEY

3405 NORTH HIGLEY, MESA AZ 85205

(480) 832-2540

FAX: (480) 832-2540

OWNER/OPERATOR: SUNSHINE ACRES CHILDREN'S HOME, INC.

ADMINISTRATOR: CAROL WHITWORTH

3405 NORTH HIGLEY, MESA AZ 85215

(480) 832-2540

FAX: (480) 832-2540

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL68-457 # BEDS: 8

NAME: HOLIDAY

6516 EAST HOLIDAY DRIVE, MESA AZ 85215

(480) 833-5746

FAX: (480) 649-3775

OWNER/OPERATOR: DARA II, INC.

ADMINISTRATOR: CYNDEE PRESUTTI

3015 NORTH 64TH STREET, MESA AZ 85215

(480) 833-5746

FAX: (480) 649-3775

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL223-517 # BEDS: 10

NAME: ILP
336 WEST 6TH STREET, MESA AZ 85201
(480) 633-2727
FAX: (480) 632-7138

OWNER/OPERATOR: ALTERNATIVE BEHAVIORAL CONSELING SERVICES

ADMINISTRATOR: MERRY BREWSTER
PO BOX 24584, TEMPE AZ 85281
(480) 633-2727
FAX: (480) 632-7138
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL62-36 # BEDS: 27

NAME: MAHNAH WING

604 WEST 9TH STREET - "A", MESA AZ 85201

(602) 969-2308

FAX: (602) 969-9277

OWNER/OPERATOR: CHILD CRISIS CENTER EAST VALLEY

ADMINISTRATOR: CHRISTINE SCARPATI

604 WEST 9TH STREET, MESA AZ 85201

(602) 969-2308

FAX: (602) 969-9277

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2715 # **BEDS:** 5
NAME: NEW HORIZON THERAPEUTIC CARE LLC
2719 EAST INVERNESS STREET, MESA AZ 85204
(480) 797-1212
FAX: (480) 777-5964

OWNER/OPERATOR: NEW HORIZON THERAPEUTIC CARE LLC
ADMINISTRATOR: KAREEM CLARK
2719 E INVERNESS ST, MESA AZ 85204
(480) 797-1212
FAX: (480) 777-5964
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL174-425 # BEDS: 10

NAME: NORFOLK HOUSE
611 NORFOLK, MESA AZ 85205
(480) 507-1817
FAX: (480) 452-0672

OWNER/OPERATOR: AGAPE YOUTH FOUNDATION

ADMINISTRATOR: KEVIN & KATHY LOTT
2990 E. RANCH COURT, GILBERT AZ 85296
(480) 507-1817
FAX: (480) 452-0672
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL49-13 # BEDS: 50

NAME: OUTDOORS

OUTDOORS, MESA AZ 85204

(480) 892-7403

FAX: (480) 892-6701

OWNER/OPERATOR: ANASAZI FOUNDATION, INC.

ADMINISTRATOR: EZEKIEL SANCHEZ

1424 SOUTH STAPLEY DRIVE, MESA AZ 85204

(480) 892-7403

FAX: (480) 892-6701

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL204-455 # BEDS: 8

NAME: POWER HOUSE #1
1216 SOUTH LESUEUR, MESA AZ 85204
(480) 987-8192
FAX: (480) 668-2602

OWNER/OPERATOR: POWER HOUSE YOUTH FACILITY

ADMINISTRATOR: GLEN MAYBERRY
1216 SOUTH LESUEUR ST., MESA AZ 85024
(480) 987-8192
FAX: (480) 668-2602
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2783 # BEDS: 16
NAME: PREHAB OF ARIZONA'S / ALICE PETERSON RESIDENCE
 901 EAST UNIVERSITY DRIVE, MESA AZ 85203
 (480) 969-4024
 FAX: (480) 733-3061

OWNER/OPERATOR: PREHAB OF ARIZONA'S ALICE PETERSON RESIDENCE

ADMINISTRATOR: HUGHES, MICHAEL
P.O. BOX 5860, MESA AZ 85211
(480) 969-4024
FAX: (480) 733-3061
EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL196-450 # BEDS: 10

NAME: SACRED JOURNEY

264 EAST IVY, MESA AZ 85201

(480) 833-1945

FAX: (480) 833-8040

OWNER/OPERATOR: SACRED JOURNEY, INC.

ADMINISTRATOR: CLAYTON SALLIS

264 EAST IVY ST., MESA AZ 85201

(480) 833-1945

FAX: (480) 833-8040

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL101-431 # BEDS: 8

NAME: SOSSAMAN HOUSE

7538 EAST DRUMMER AVENUE, MESA AZ 85208

(480) 854-7660

FAX: (480) 632-9381

OWNER/OPERATOR: SUNAIRE HOUSE, INC.

ADMINISTRATOR: KEN PADILLA

1221 NORTH PEBBLE BEACH DRIVE, GILBERT AZ 85234

(480) 854-7660

FAX: (480) 632-9381

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL101-430 # BEDS: 8

NAME: STAPLEY HOUSE
1235 EAST FORGE AVENUE, MESA AZ 85204
(480) 854-7660
FAX: (480) 632-9381

OWNER/OPERATOR: SUNAIRE HOUSE, INC.

ADMINISTRATOR: KEN PADILLA
1221 NORTH PEBBLE BEACH DRIVE, GILBERT AZ 85234
(480) 854-7660
FAX: (480) 632-9381
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2682 # BEDS: 5

NAME: THE ESTABLISHMENT FOR LIFE, LLC
756 WEST PECOS AVENUE, MESA AZ 85210
(480) 720-4682
FAX: (000) 000-0000

OWNER/OPERATOR: HE ESTABLISHMENT FOR LIFE, LLC

ADMINISTRATOR: ANDERSON, GINO
4836 EAST MEADOWLARK WAY, QUEEN CREEK AZ 85242
(480) 720-4682
FAX: (000) 000-0000

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2457 # BEDS: 10

NAME: THE U-TURN FOUNDATION

4005 EAST EDGEWOOD AVENUE, MESA AZ 85206

(480) 830-3871

FAX: (480) 830-3564

OWNER/OPERATOR: MELONY DARNELL

ADMINISTRATOR: DARNELL, MELONY

3638 EAST SOUTHERN AVE, SUITE C105-125, MESA AZ 85206

(480) 830-3871

FAX: (480) 830-3564

EMAIL: UTURNFND@MSN.COM

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL62-37 # BEDS: 15

NAME: THERESA WING
604 WEST 9TH STREET - "B", MESA AZ 86201
(602) 969-2308
FAX: (602) 969-9277

OWNER/OPERATOR: CHILD CRISIS CENTER EAST VALLEY

ADMINISTRATOR: CHRISTINE SCARPATI
604 WEST 9TH STREET, MESA AZ 85201
(602) 969-2308
FAX: (602) 969-9277
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2891 # BEDS: 8

NAME: TRI / PHASE GROUP HOME / ELMWOOD
2355 EAST ELMWOOD STREET, MESA AZ 85213
(623) 474-6326
FAX: (623) 474-6516

OWNER/OPERATOR: TRI/PHASE GROUP HOME

ADMINISTRATOR: MCKINNEY, LUCIAN
18403 WEST VERDIN ROAD, GOODYEAR AZ 85338
(623) 474-6326
FAX: (623) 474-6516

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: MESA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL40-2 # BEDS: 10

NAME: VISTA LINDA

749 WEST 2ND STREET, MESA AZ 85201

(480) 792-0265

FAX: (480) 792-0266

OWNER/OPERATOR: A&A COTTAGES

ADMINISTRATOR: ELIZABETH MAYER

749 WEST 2ND STREET, MESA AZ 85214

(480) 792-0265

FAX: (480) 792-0266

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **MOHAVE VALLEY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL63-38** **# BEDS:** 20

NAME: **EVANS LANE**

9575 EVANS LANE, MOHAVE VALLEY AZ 86440

(928) 763-1945

FAX: (928) 763-8809

OWNER/OPERATOR: COLORADO RIVER REGIONAL YOUTH SERVICES DBA WEST CA

ADMINISTRATOR: TRACY STEVENS

1748 HIGHWAY 95, SUITE 14, BULLHEAD CITY AZ 86442

(928) 763-1945

FAX: (928) 763-8809

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: ORACLE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL230-531 # BEDS: 66

NAME: SYCAMORE CANYON

36895 MT. LEMMON ROAD, ORACLE AZ 85623

(520) 896-9391

FAX: (520) 866-7812

OWNER/OPERATOR: RITE OF PASSAGE, INC DBA SYCAMORE CANYON

ADMINISTRATOR: IKE SHIPMAN

36895 MT. LEMMON ROAD, ORACLE AZ 85623

(520) 896-9391

FAX: (520) 866-7812

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PAYSON**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL92-121** **# BEDS:** 12

NAME: **PAYSON CENTER**

803 WEST MAIN, PAYSON AZ 85547

(480) 964-8721

FAX: (480) 837-5955

OWNER/OPERATOR: OUTREACH SERVICES

ADMINISTRATOR: KIMBERLY MURPHY

803A WEST MAIN STREET, PAYSON AZ 85541

(480) 964-8721

FAX: (480) 837-5955

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PEORIA**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-149** **# BEDS:** 10

NAME: **AUGUSTA HOUSE**

11052 WEST AUGUSTA AVENUE, PEORIA AZ 85307

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL50-14 **# BEDS:** 10

NAME: CHRISTOPHER HOUSE

9160 WEST ALBERT LANE, PEORIA AZ 85382

(623) 362-2018

FAX: (623) 362-2019

OWNER/OPERATOR: ANGEL SOCIETY, INC.

ADMINISTRATOR: JILL LAROSE

9160 WEST ALBERT LANE, PEORIA AZ 85382

(623) 362-2018

FAX: (623) 362-2019

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL100-132 **# BEDS:** 10

NAME: FAITH HOUSE

9002 WEST DEER VALLEY ROAD, PEORIA AZ 85382

(480) 922-8212

FAX: (480) 443-9219

OWNER/OPERATOR: CHILDHELP, INC

ADMINISTRATOR: JOHN REID

15757 NORTH 78TH STREET, SCOTTSDALE AZ 85260

(480) 922-8212

FAX: (480) 443-9219

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

MUNICIPALITY: PEORIA

FACILITY: CWL104-151 **# BEDS:** 10

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2333 **# BEDS:** 10

NAME: **GRACE OF SERENITY LIVING INC**
8340 NORTH 86TH LANE, PEORIA AZ 85345
(623) 266-0810
FAX: (602) 441-4694

OWNER/OPERATOR: TAMMY R. MEADE

ADMINISTRATOR: MEADE, TAMMY
3852 15TH AVENUE, PEORIA AZ 85015
(623) 266-0810
FAX: (602) 441-4694

EMAIL: GRACEOFSERENITYLIVING@COX.NET

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-247** **# BEDS:** 10
NAME: **HAPPY VALLEY HOUSE**
 25924 NORTH 67TH DRIVE, PEORIA AZ 85383
 (623) 842-4323
 FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.
ADMINISTRATOR: SIMON KOTTOOR
10555 NORTH 58TH DRIVE, GLENDALE AZ 85302
(623) 842-4323
FAX: (623) 842-4349
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY
CONTACT: BERTHA WINFIELD SECTION MANAGER
 (602) 347-6340
 EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL100-133 **# BEDS:** 10

NAME: HOPE HOUSE

9152 NORTH 82ND LANE, PEORIA AZ 85345

(480) 922-8212

FAX: (480) 443-9219

OWNER/OPERATOR: CHILDHELP, INC

ADMINISTRATOR: JOHN REID

15757 NORTH 78TH STREET, SCOTTSDALE AZ 85260

(480) 922-8212

FAX: (480) 443-9219

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-204 **# BEDS:** 10

NAME: **JOMAX HOUSE**
27351 NORTH 84TH GLEN, PEORIA AZ 85382
(623) 842-4323
FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR
10555 NORTH 58TH DRIVE, GLENDALE AZ 85302
(623) 842-4323
FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PEORIA**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2170** **# BEDS:** 7

NAME: **NEW HORIZON YOUTH HOMES INC**
6726 WEST CHOLLA, PEORIA AZ 85345
(480) 722-2730
FAX: (480) 664-4296

OWNER/OPERATOR: NEW HORIZON YOUTH HOMES INC

ADMINISTRATOR: GRANADO, THOMAS
P O BOX 2754, CHANDLER AZ 85244
(480) 722-2730
FAX: (480) 664-4296
EMAIL: TOM@NHYH.ORG

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PEORIA**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2428** **# BEDS:** 7
NAME: **NEW HORIZON YOUTH HOMES INC/ HORIZON HOUSE**
8731 NORTH 83RD DRIVE, PEORIA AZ 85345
(480) 722-2730
FAX: (480) 664-4296

OWNER/OPERATOR: NEW HORIZON YOUTH HOMES, INC.

ADMINISTRATOR: GRANADO, THOMAS

P O BOX 2754, CHANDLER AZ 85244

(480) 722-2730

FAX: (480) 664-4296

EMAIL: TOM@NHYH.ORG

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-427 **# BEDS:** 10

NAME: **NORTHERN HOUSE**

8398 NORTH 98TH LANE, PEORIA AZ 85345

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PEORIA**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-152** **# BEDS:** 10

NAME: **STONEVIEW HOUSE**

9663 NORTH 83RD DRIVE, PEORIA AZ 85345

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PEORIA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-248 **# BEDS:** 10

NAME: **WEST WING HOUSE**

26920 NORTH 83RD GLEN, PEORIA AZ 85383

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL70-49** **# BEDS:** 9

NAME: **AGAPE HOUSE**

14625 NORTH 26TH AVENUE, PHOENIX AZ 85023

(602) 326-2253

FAX: (928) 282-8567

OWNER/OPERATOR: ESTEEM CHILDREN'S SERVICES

ADMINISTRATOR: PATRICIA BERKLEY

120 GRAY MOUNTAIN DRIVE, SEDONA AZ 86336

(602) 326-2253

FAX: (928) 282-8567

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL46-8 # BEDS: 10**NAME:** ALL MY CHILDREN #1

19645 NORTH THIRD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

OWNER/OPERATOR: ALL MY CHILDREN**ADMINISTRATOR:** JOAN WELLS

19432 N 3RD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL46-9 # BEDS: 10**NAME:** ALL MY CHILDREN #2

1415 WEST RENEE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

OWNER/OPERATOR: ALL MY CHILDREN**ADMINISTRATOR:** JOAN WELLS

19432 N 3RD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL46-10 # BEDS: 10**NAME:** ALL MY CHILDREN #3

2238 WEST SEQUOIA DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

OWNER/OPERATOR: ALL MY CHILDREN**ADMINISTRATOR:** JOAN WELLS

19432 N 3RD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL46-202** **# BEDS:** 10

NAME: **ALL MY CHILDREN #4**

2302 WEST VILLAGE DRIVE, PHOENIX AZ 85023

(623) 869-8692

FAX: (623) 869-8697

OWNER/OPERATOR: ALL MY CHILDREN

ADMINISTRATOR: JOAN WELLS

19432 N 3RD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL46-239 # BEDS: 10

NAME: ALL MY CHILDREN #5

18811 NORTH SEVENTH DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

OWNER/OPERATOR: ALL MY CHILDREN

ADMINISTRATOR: JOAN WELLS

19432 N 3RD DRIVE, PHOENIX AZ 85027

(623) 869-8692

FAX: (623) 869-8697

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2187 # BEDS: 8
NAME: AMERICAN INDIAN PREVENTION
1902 NORTH 23RD STREET, PHOENIX AZ 85006
(602) 424-1600
FAX: (602) 532-7202

OWNER/OPERATOR: AMERICAN INDIAN PREVENTION COALITION, INC.

ADMINISTRATOR: BEACH, BONNY
P O BOX 25047, PHOENIX AZ 85002
(602) 424-1600
FAX: (602) 532-7202
EMAIL: BBEACH@NDNS4WELLNESS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2375 # BEDS: 5
NAME: AMERICAN INDIAN PREVENTION COALITION/ MORNING STAR
1622 NORTH 27TH PLACE, PHOENIX AZ 85006
(602) 424-1600
FAX: (602) 532-7202

OWNER/OPERATOR: AMERICAN INDIAN PREVENTION COALITION, INC.

ADMINISTRATOR: BEACH, BONNY
P O BOX 25047, PHOENIX AZ 85002
(602) 424-1600
FAX: (602) 532-7202
EMAIL: BBEACH@NDNS4WELLNESS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2772 # BEDS: 8
NAME: BACK TO LIFE, INC ROANOKE HOUSE
5915 WEST ROANOKE AVENUE, PHOENIX AZ 85035
(602) 268-4831
FAX: (602) 268-0068

OWNER/OPERATOR: BACK TO LIFE, INC ROANOKE HOUSE
ADMINISTRATOR: PADILLA- CONTRERAS, GRACIE
2919 WEST POLLACK STREET, PHOENIX AZ 85041
(602) 268-4831
FAX: (602) 268-0068
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL111-164 # BEDS: 5**NAME: BLUHM HOUSE**

2529 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

OWNER/OPERATOR: THERAPEUTIC RESIDENCES FOR YOUTH, INC.**ADMINISTRATOR: MARTHA HRISOULAS**

2523 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY: AZ DEPT OF ECONOMIC SECURITY****CONTACT: BERTHA WINFIELD SECTION MANAGER**

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL58-25** **# BEDS:** 8

NAME: **BOYS HOME**

329 EAST MEADOWBROOK, PHOENIX AZ 85012

(602) 266-4873

FAX: (602) 200-8426

OWNER/OPERATOR: BOYS HOPE GIRLS HOPE OF ARIZONA , INC.

ADMINISTRATOR: MELANIE MCCLINTOCK

3443 NORTH CENTRAL #713, PHOENIX AZ 85012

(602) 266-4873

FAX: (602) 200-8426

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL114-183** **# BEDS:** 11

NAME: **BOYS HOUSE**

323 EAST WILLETТА, PHOENIX AZ 85004

(602) 271-9904

FAX: (602) 271-0240

OWNER/OPERATOR: TUMBLEWEED, CENTER FOR YOUTH DEVELOPMENT

ADMINISTRATOR: RICHARD GEASLAND

1419 NORTH 3RD STREET, SUITE 102, PHOENIX AZ 85004

(602) 271-9904

FAX: (602) 271-0240

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL104-150** **# BEDS:** 10

NAME: **BUCKSKIN HOUSE**

4032 WEST BUCKSKIN TRAIL, PHOENIX AZ 85310

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.

ADMINISTRATOR: SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL111-163** **# BEDS:** 5

NAME: **CAMPBELL HOUSE**

2535 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

OWNER/OPERATOR: THERAPEUTIC RESIDENCES FOR YOUTH, INC.

ADMINISTRATOR: MARTHA HRISOULAS

2523 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL51-16** **# BEDS:** 5

NAME: **CANTERBURY**

82 EAST CANTERBURY, PHOENIX AZ 85029

(602) 942-7050

FAX: (602) 298-6655

OWNER/OPERATOR: PLACES OF THE HEART STEP-N-STONES, INC.

ADMINISTRATOR: YVONNE GRUBBS

82 EAST CANTERBURY COURT, PHOENIX AZ 85068

(602) 942-7050

FAX: (602) 298-6655

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL70-47** **# BEDS:** 8

NAME: **CASA BUENA**
15827 NORTH 23RD DRIVE, PHOENIX AZ 85023
(602) 326-2253
FAX: (928) 282-8567

OWNER/OPERATOR: ESTEEM CHILDREN'S SERVICES

ADMINISTRATOR: PATRICIA BERKLEY
120 GRAY MOUNTAIN DRIVE, SODONA AZ 86336
(602) 326-2253
FAX: (928) 282-8567
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL60-28** **# BEDS:** 16

NAME: **CASA LINDA LODGE**

1825 WEST NORTHERN, PHOENIX AZ 85021

(602) 285-1999

FAX: (602) 285-0311

OWNER/OPERATOR: CATHOLIC CHARITIES COMMUNITY SERVICES, INC.

ADMINISTRATOR: PAUL J. MATRODAM

4747 NORTH 7TH AVE., PHOENIX AZ 85013

(602) 285-1999

FAX: (602) 285-0311

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2904 # BEDS: 5**NAME:** CDH FOUNDATION

14854 SOUTH 46TH STREET, PHOENIX AZ 85044

(602) 295-0235

FAX: (000) 000-0000

OWNER/OPERATOR: CDH FOUNDATION**ADMINISTRATOR:** CARLOS HOWARD

14854 SOUTH 46TH STREET, PHOENIX AZ 85044

(602) 295-0235

FAX: (000) 000-0000

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL66-41 # BEDS: 41**NAME:** CRISIS NURSERY

2711 EAST ROSSEVELT ROAD, PHOENIX AZ 85008

(602) 273-7363

FAX: (602) 244-1316

OWNER/OPERATOR: CRISIS NURSERY, INC.**ADMINISTRATOR:** MARSHA PORTER

2334 EAST POLK, PHOENIX AZ 85008

(602) 273-7363

FAX: (602) 244-1316

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL70-48 **# BEDS:** 9**NAME:** FAITH HOUSE

15824 NORTH 29TH AVENUE, PHOENIX AZ 85023

(602) 326-2253

FAX: (928) 282-8567

OWNER/OPERATOR: ESTEEM CHILDREN'S SERVICES**ADMINISTRATOR:** PATRICIA BERKLEY

120 GRAY MOUNTAIN DRIVE, SODONA AZ 86336

(602) 326-2253

FAX: (928) 282-8567

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2693** **# BEDS:** 6

NAME: **FAY'S HOUSE 123 LLC**
408 WEST BEVERLY ROAD, PHOENIX AZ 85041
(602) 304-0316
FAX: (602) 276-0138

OWNER/OPERATOR: FAY'S HOUSE 123 LLC

ADMINISTRATOR: MCQUILLER, DEE'ANNA
408 WEST BEVERLY ROAD, PHOENIX AZ 85041
(602) 304-0316
FAX: (602) 276-0138

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-52 # BEDS: 5**NAME:** FISHER HOUSE

2218 NORTH 86TH LANE, PHOENIX AZ 85037

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.**ADMINISTRATOR:** ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2133 # BEDS: 40
NAME: FLORENCE CRITTENTON SERVICES OF ARIZONA, INC
715 WEST MARIPOSA STREET, PHOENIX AZ 85013
(602) 274-7318
FAX: (602) 274-7549

OWNER/OPERATOR: FLORENCE CRITTENTON SERVICES OF ARIZONA, INC.

ADMINISTRATOR: VOLHEIN, LINDA
715 WEST MARIPOSA STREET, PHOENIX AZ 85013
(602) 274-7318
FAX: (602) 274-7549
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL114-180** **# BEDS:** 10

NAME: **FOCUSED HOUSE**

1733 WEST MOUNTAIN VIEW ROAD, PHOENIX AZ 85021

(602) 271-9904

FAX: (602) 271-0240

OWNER/OPERATOR: TUMBLEWEED, CENTER FOR YOUTH DEVELOPMENT

ADMINISTRATOR: RICHARD GEASLAND

1419 NORTH 3RD STREET, SUITE 102, PHOENIX AZ 85004

(602) 271-9904

FAX: (602) 271-0240

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2679 # **BEDS:** 5
NAME: FSL PATHWAYS INC-ASSISTED GROUP LIVING PROGRAM-HAY
4023 WEST HAYWARD AVENUE, PHOENIX AZ 85051
(602) 285-1800
FAX: (602) 266-4912

OWNER/OPERATOR: FSL PATHWAYS
ADMINISTRATOR: HILL, CAROLYN
1201 EAST THOMAS ROAD, PHOENIX AZ 85014
(602) 285-1800
FAX: (602) 266-4912
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL104-205 # BEDS: 10**NAME:** GAMBIT HOUSE

27619 NORTH 23RD DRIVE, PHOENIX AZ 85027

(623) 842-4323

FAX: (623) 842-4349

OWNER/OPERATOR: SUNSHINE RESIDENTIAL HOMES, INC.**ADMINISTRATOR:** SIMON KOTTOOR

10555 NORTH 58TH DRIVE, GLENDALE AZ 85302

(623) 842-4323

FAX: (623) 842-4349

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL58-26** **# BEDS:** 8

NAME: **GIRLS HOME**

75 EAST PIERSON, PHOENIX AZ 85012

(602) 266-4873

FAX: (602) 200-8426

OWNER/OPERATOR: BOYS HOPE GIRLS HOPE OF ARIZONA , INC.

ADMINISTRATOR: MELANIE MCCLINTOCK

3443 NORTH CENTRAL #713, PHOENIX AZ 85012

(602) 266-4873

FAX: (602) 200-8426

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2539** **# BEDS:** 5

NAME: **GRACE OF SERENITY LIVING INC**
6620 SOUTH 26TH DRIVE, PHOENIX AZ 85041
(623) 266-0810
FAX: (602) 441-4694

OWNER/OPERATOR: BEN GRAY & TAMMY MEADE-GRAY

ADMINISTRATOR: MEADE-GRAY, TAMMY
2720 EAST THOMAS SUITE B-200, PHOENIX AZ 85016
(623) 266-0810
FAX: (602) 441-4694
EMAIL: GRACEOFSERENITYLIVING@COX.NET
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL176-436** **# BEDS:** 10

NAME: **GUILDING LIGHT**

2211 WEST FAWN DRIVE, PHOENIX AZ 85041

(602) 323-1796

FAX: (602) 328-3917

OWNER/OPERATOR: GUIDING LIGHT CHILD CARE, LLC

ADMINISTRATOR: DEANNA OWENS

2211 WEST FAWN DRIVE, PHOENIX AZ 85041

(602) 323-1796

FAX: (602) 328-3917

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-50** **# BEDS:** 6

NAME: **HARMONY**

4244 WEST BROWN, PHOENIX AZ 85051

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-62 **# BEDS:** 6

NAME: HIGHLAND

9417 WEST WILSHIRE, PHOENIX AZ 85307

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL65-40** **# BEDS:** 5

NAME: **HOPE HEAVEN SHELTER**

6001 WEST LEWIS AVENUE, PHOENIX AZ 85035

(602) 495-1432

FAX: (602) 495-1435

OWNER/OPERATOR: CREATIVE INNOVATIONS, INC.

ADMINISTRATOR: MELISSA JENKINS-SIMON

1117 NORTH 3RD STREET, PHOENIX AZ 85004

(602) 495-1432

FAX: (602) 495-1435

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-497** **# BEDS:** 6

NAME: **IRENE HOUSE**

6742 NORTH 28TH DRIVE, PHOENIX AZ 85017

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-60** **# BEDS:** 5

NAME: **JUST 4 BOYS**

8534 NORTH 40TH AVENUE, PHOENIX AZ 85015

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-58** **# BEDS:** 10

NAME: **LIGHTHOUSE**

328 EAST BETHANY HOME ROAD, PHOENIX AZ 85012

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL100-131 # BEDS: 8**NAME:** LOVE HOUSE

13113 NORTH 24TH AVENUE, PHOENIX AZ 85029

(480) 922-8212

FAX: (480) 443-9219

OWNER/OPERATOR: CHILDHELP, INC**ADMINISTRATOR:** JOHN REID

15757 NORTH 78TH STREET, SCOTTSDALE AZ 85260

(480) 922-8212

FAX: (480) 443-9219

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL111-165 # BEDS: 6**NAME:** MADISON HOUSE

2523 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

OWNER/OPERATOR: THERAPEUTIC RESIDENCES FOR YOUTH, INC.**ADMINISTRATOR:** MARTHA HRISOULAS

2523 EAST CAMPBELL, PHOENIX AZ 85016

(602) 955-4615

FAX: (602) 957-4133

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2728 # BEDS: 5**NAME:** MAKING A DIFFERENCE

6437 SOUTH 21ST PLACE, PHOENIX AZ 85042

(602) 276-6557

FAX: (602) 305-5103

OWNER/OPERATOR: MAKING A DIFFERENCE**ADMINISTRATOR:** WHEATON JR, ROBERT

6437 SOUTH 21ST PLACE, PHOENIX AZ 85042

(602) 276-6557

FAX: (602) 305-5103

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL51-15** **# BEDS:** 5

NAME: **MANDALAY**

3826 WEST MANDALAY, PHOENIX AZ 85029

(602) 942-7050

FAX: (602) 298-6655

OWNER/OPERATOR: PLACES OF THE HEART STEP-N-STONES, INC.

ADMINISTRATOR: YVONNE GRUBBS

82 EAST CANTERBURY COURT, PHOENIX AZ 85068

(602) 942-7050

FAX: (602) 298-6655

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL66-505 # BEDS: 5**NAME:** MARCUS HOUSE
6516 NORTH 13TH STREET, PHOENIX AZ 85014
(602) 273-7363
FAX: (602) 244-1316**OWNER/OPERATOR:** CRISIS NURSERY, INC.**ADMINISTRATOR:** MARSHA PORTER
2334 EAST POLK, PHOENIX AZ 85008
(602) 273-7363
FAX: (602) 244-1316
EMAIL: UNAVAILABLE*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-53 # BEDS: 10**NAME:** MONTEROSA

6334 WEST MONTEROSA STREET, PHOENIX AZ 85033

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.**ADMINISTRATOR:** ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL65-39** **# BEDS:** 5

NAME: **NEW HOPE SHELTER**

6009 WEST LEWIS, PHOENIX AZ 85035

(602) 495-1432

FAX: (602) 495-1435

OWNER/OPERATOR: CREATIVE INNOVATIONS, INC.

ADMINISTRATOR: MELISSA JENKINS-SIMON

1117 NORTH 3RD STREET, PHOENIX AZ 85004

(602) 495-1432

FAX: (602) 495-1435

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2933 # BEDS: 8

NAME: OASIS CARE LIVING, LLC
6917 SOUTH 11TH DRIVE, PHOENIX AZ 85041
(602) 276-4531
FAX: (602) 276-4531

OWNER/OPERATOR: OASIS CARE LIVING, LLC

ADMINISTRATOR: KNOX, LESTER
6434 SOUTH 17TH PLACE, PHOENIX AZ 85042
(602) 276-4531
FAX: (602) 276-4531
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL114-181 **# BEDS:** 12
NAME: OPEN HANDS HOUSE
 4829 NORTH 37TH AVENUE, PHOENIX AZ 85019
 (602) 271-9904
 FAX: (602) 271-0240

OWNER/OPERATOR: TUMBLEWEED, CENTER FOR YOUTH DEVELOPMENT
ADMINISTRATOR: RICHARD GEASLAND
1419 NORTH 3RD STREET, SUITE 102, PHOENIX AZ 85004
(602) 271-9904
FAX: (602) 271-0240
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY
CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-69** **# BEDS:** 6

NAME: **REDDEN HOUSE**

2011 NORTH 94TH LANE, PHOENIX AZ 85037

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL70-45 # BEDS: 6**NAME:** ROCKWOOD HOUSE

3817 EAST ROCKWOOD DRIVE, PHOENIX AZ 85050

(602) 326-2253

FAX: (928) 282-8567

OWNER/OPERATOR: ESTEEM CHILDREN'S SERVICES**ADMINISTRATOR:** PATRICIA BERKLEY

120 GRAY MOUNTAIN DRIVE, SODONA AZ 86336

(602) 326-2253

FAX: (928) 282-8567

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL106-154** **# BEDS:** 5

NAME: **ROESER**

511 EAST ROESER ROAD, PHOENIX AZ 85040

(602) 323-0227

FAX: (602) 276-8675

OWNER/OPERATOR: TEEN OUTREACH ACADEMY

ADMINISTRATOR: JOHN VINSON

5809 SOUTH 5TH STREET, PHOENIX AZ 85040

(602) 323-0227

FAX: (602) 276-8675

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL106-465** **# BEDS:** 10

NAME: **SOUTH 5TH STREET**
5809 SOUTH 5TH STREET, PHOENIX AZ 85040
(602) 323-0227
FAX: (602) 276-8675

OWNER/OPERATOR: TEEN OUTREACH ACADEMY

ADMINISTRATOR: JOHN VINSON
5809 SOUTH 5TH STREET, PHOENIX AZ 85040
(602) 323-0227
FAX: (602) 276-8675
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2624 # BEDS: 5**NAME:** STEP BY STEP

414 WEST BEAUTIFUL LANE, PHOENIX AZ 85041

(602) 268-4051

FAX: (602) 268-7218

OWNER/OPERATOR: AMIA CHONES**ADMINISTRATOR:** CHONES, AMIA

7319 SOUTH 30TH AVENUE, PHOENIX AZ 85041

(602) 268-4051

FAX: (602) 268-7218

EMAIL: SBSCHONES@YAHOO.COM

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL70-46** **# BEDS:** 10

NAME: **TARO HOUSE**

2511 EAST TARO LANE, PHOENIX AZ 85050

(602) 326-2253

FAX: (928) 282-8567

OWNER/OPERATOR: ESTEEM CHILDREN'S SERVICES

ADMINISTRATOR: PATRICIA BERKLEY

120 GRAY MOUNTAIN DRIVE, SODONA AZ 86336

(602) 326-2253

FAX: (928) 282-8567

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2765 # BEDS: 5**NAME:** TIGNEX GROUP LLC
2521 EAST WOOD STREET, PHOENIX AZ 85040
(480) 695-5849
FAX: (602) 232-2411**OWNER/OPERATOR:** TIGNEX GROUP LLC**ADMINISTRATOR:** RICHARD OKEZIE
2521 EAST WOOD ST, PHOENIX AZ 85040
(480) 695-5849
FAX: (602) 232-2411

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL72-71 # BEDS: 6**NAME:** UJIMA HOUSE

4235 WEST SAN JUAN AVENUE, PHOENIX AZ 85019

(602) 973-2685

FAX: (602) 307-5580

OWNER/OPERATOR: FIBCO FAMILY SERVICES, INC.**ADMINISTRATOR:** KAREN E. CURRY

1141 EAST JEFFERSON STREET, PHOENIX AZ 85004

(602) 973-2685

FAX: (602) 307-5580

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2899 # BEDS: 5
NAME: UNITED YOUTH & FAMILY SERVICES
27818 NORTH 24TH LANE, PHOENIX AZ 85085
(602) 460-1449
FAX: (602) 230-0166

OWNER/OPERATOR: UNITED YOUTH & FAMILY SERVICES

ADMINISTRATOR: ABDALLAH, ROBERTA
2413 WEST FETLOCK TRAIL, PHOENIX AZ 85085
(602) 460-1449
FAX: (602) 230-0166

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH2597** **# BEDS:** 5

NAME: **VISION GROUP HOME**

714 WEST SAINT KATERI AVENUE, PHOENIX AZ 85041

(602) 568-2292

FAX: (602) 232-2196

OWNER/OPERATOR: KETURAH MATTOX

ADMINISTRATOR: MATTOX, KATURAH

714 WEST SAINT KATERI AVENUE, PHOENIX AZ 85041

(602) 568-2292

FAX: (602) 232-2196

EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL39-495** **# BEDS:** 6

NAME: **WILSHIRE HOUSE**

9409 WEST WILSHIRE AVENUE, PHOENIX AZ 85037

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.

ADMINISTRATOR: ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PHOENIX**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1125** **# BEDS:** 16
NAME: **Y D I TRANSITIONAL LIVING CENTER**
1050-B NORTH 19TH STREET, PHOENIX AZ 85006
(602) 254-0884
FAX: (602) 258-4033

OWNER/OPERATOR: YOUTH DEVELOPMENT INSTITUTE
ADMINISTRATOR: COCOROS, DAVID
1830 EAST ROOSEVELT, PHOENIX AZ 85006
(602) 254-0884
FAX: (602) 258-4033
EMAIL: DAVIDCOCOROS@YDI.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: PHOENIX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL114-502 # BEDS: 20**NAME:** YAP

2344 EAST EARLL DRIVE, PHOENIX AZ 85016

(602) 271-9904

FAX: (602) 271-0240

OWNER/OPERATOR: TUMBLEWEED, CENTER FOR YOUTH DEVELOPMENT**ADMINISTRATOR:** RICHARD GEASLAND

1419 NORTH 3RD STREET, SUITE 102, PHOENIX AZ 85004

(602) 271-9904

FAX: (602) 271-0240

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PRESCOTT**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL90-116** **# BEDS:** 7

NAME: **TRANSITIONAL LIVING**

1718 WILLOW CREEK, PRESCOTT AZ 86301

(520) 670-9040

FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.

ADMINISTRATOR: NANCY PANICO

630 EAST 9TH STREET, TUCSON AZ 85705

(520) 670-9040

FAX: (520) 670-1753

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PRESCOTT**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL90-114** **# BEDS:** 7

NAME: **TURNING POINT SHELTER**
1718 WILLOW CREEK ROAD, PRESCOTT AZ 86301
(520) 670-9040
FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.

ADMINISTRATOR: NANCY PANICO
630 EAST 9TH STREET, TUCSON AZ 85705
(520) 670-9040
FAX: (520) 670-1753
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **PRESCOTT VALLEY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1487** **# BEDS:** **7**
NAME: **MINGUS MOUNTAIN ACADEMY/ EMILY HOUSE**
3801 ROBERT ROAD, PRESCOTT VALLEY AZ 86314
(602) 335-2000
FAX: (602) 249-1311

OWNER/OPERATOR: MINGUS MOUNTAIN ESTATE RESIDENTIAL CENTER INC.

ADMINISTRATOR: BANKEN, CHRIS
P O BOX 26485, PRESCOTT VALLEY AZ 86314
(602) 335-2000
FAX: (602) 249-1311
EMAIL: CBANKEN@MMAAZ.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **QUEEN CREEK**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL98-127** **# BEDS:** 246

NAME: **CANYON STATE ACADEMY**

20061 EAST RITTENHOUSE ROAD, QUEEN CREEK AZ 85242

(480) 987-9700

FAX: (480) 987-9701

OWNER/OPERATOR: RITE OF PASSAGE, INC. (CANYON STATE ACADEMY)

ADMINISTRATOR: BRIAN HEATH

20061 EAST RITTENHOUSE ROAD, QUEEN CREEK AZ 85242

(480) 987-9700

FAX: (480) 987-9701

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **QUEEN CREEK**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL98-442** **# BEDS:** 48**NAME:** **WRANGLER & BUTLER**

20061 EAST RITTENHOUSE ROAD, QUEEN CREEK AZ 85242

(480) 987-9700

FAX: (480) 987-9701

OWNER/OPERATOR: RITE OF PASSAGE, INC. (CANYON STATE ACADEMY)**ADMINISTRATOR:** BRIAN HEATH

20061 EAST RITTENHOUSE ROAD, QUEEN CREEK AZ 85242

(480) 987-9700

FAX: (480) 987-9701

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SCOTTSDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL100-129 # BEDS: 10

NAME: 68TH PLACE

10802 NORTH 68TH PLACE, SCOTTSDALE AZ 85254

(480) 922-8212

FAX: (480) 443-9219

OWNER/OPERATOR: CHILDHELP, INC

ADMINISTRATOR: JOHN REID

15757 NORTH 78TH STREET, SCOTTSDALE AZ 85260

(480) 922-8212

FAX: (480) 443-9219

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SCOTTSDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL22-480 # BEDS: 11

NAME: DEVEREUX E1

6401 EAST EUGIE, SCOTTSDALE AZ 85254

(520) 296-5551

FAX: (520) 886-3335

OWNER/OPERATOR: DEVEREUX OF ARIZONA

ADMINISTRATOR: JAMES M. COLE

6141 EAST GRANT ROAD, TUCSON AZ 85712

(520) 296-5551

FAX: (520) 886-3335

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SCOTTSDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL22-481 # BEDS: 12

NAME: DEVEREUX E2

6411 EAST EUGIE, SCOTTSDALE AZ 85254

(520) 296-5551

FAX: (520) 886-3335

OWNER/OPERATOR: DEVEREUX OF ARIZONA

ADMINISTRATOR: JAMES M. COLE

6141 EAST GRANT ROAD, TUCSON AZ 85712

(520) 296-5551

FAX: (520) 886-3335

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SCOTTSDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL77-82 **# BEDS:** 10

NAME: MOYER HOUSE

8204 EAST MONTEREY WAY, SCOTTSDALE AZ 85251

(480) 941-0150

FAX: (480) 941-0802

OWNER/OPERATOR: GIRLS RANCH INC. OF ARIZONA

ADMINISTRATOR: ANN BARKER

8204 EAST MONTEREY WAY, SCOTTSDALE AZ 85251

(480) 941-0150

FAX: (480) 941-0802

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SCOTTSDALE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1383 # BEDS: 12**NAME:** THE NEW FOUNDATION

1200 NORTH 77TH STREET, SCOTTSDALE AZ 85257

(480) 945-3302

FAX: (480) 945-9308

OWNER/OPERATOR: THE NEW FOUNDATION**ADMINISTRATOR:** OWENS, JEWEL

P O BOX 3828, SCOTTSDALE AZ 85271

(480) 945-3302

FAX: (480) 945-9308

EMAIL: JOWNES@THENEWFOUNDATION.COM

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SIERRA VISTA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-241 # BEDS: 3**NAME:** CHILDREN'S VILLAGE # 7

711 STEPPE PLACE, SIERRA VISTA AZ 85635

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY**ADMINISTRATOR:** DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SIERRA VISTA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1422 # BEDS: 16
NAME: MARY'S MISSION AND DEVELOPMENT CENTER
345 TAYLOR DRIVE, SIERRA VISTA AZ 85635
(520) 417-2115
FAX: (520) 417-2114

OWNER/OPERATOR: MARY'S MISSION DEVELOPMENTAL CENTER

ADMINISTRATOR: LACEY, WILLIAM
345 TAYLOR DRIVE, SIERRA VISTA AZ 85635
(520) 417-2115
FAX: (520) 417-2114
EMAIL: WLACEY@C2I2.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: SOMERTON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2805 # **BEDS:** 8
NAME: THE AMERICAN EAGLE BOYS RANCH
3536 WEST VENUS WAY, SOMERTON AZ 85350
(928) 919-3486
FAX: (928) 726-6094

OWNER/OPERATOR: THE AMERICAN EAGLE BOYS RANCH

ADMINISTRATOR: HANSEN, NEIL
P.O. BOX 508, YUMA AZ 85366
(928) 919-3486
FAX: (928) 726-6094
EMAIL: NO E-MAIL ADDRESS

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **SPRING VALLEY**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **BH1721** **# BEDS:** 80**NAME:** **SPRING RIDGE ACADEMY**

13690 SOUTH BURTON ROAD, SPRING VALLEY AZ 86333

(928) 632-4602

FAX: (928) 632-7661

OWNER/OPERATOR: SPRING RIDGE ACADEMY**ADMINISTRATOR:** HEES, GARY

13690 SOUTH BURTON ROAD, SPRING VALLEY AZ 86333

(928) 632-4602

FAX: (928) 632-7661

EMAIL: SCOATNEY@SPRINGRIDGEACADEMY.COM

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **SURPRISE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL219-508** **# BEDS:** 10

NAME: **LANGER HOUSE**

17411 WEST LANGER LANE, SURPRISE AZ 85388

(623) 521-6936

FAX: (623) 594-4708

OWNER/OPERATOR: WORLD KIDS, IIC

ADMINISTRATOR: ELINOR CROPP

13281 NORTH 78TH DRIVE, PEORIA AZ 85381

(623) 521-6936

FAX: (623) 594-4708

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **SURPRISE**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL224-519** **# BEDS:** **5**

NAME: **RIMROCK HOUSE**

17006 WEST RIMROCK STREET, SURPRISE AZ 85388

(623) 262-4238

FAX: (623) 444-4491

OWNER/OPERATOR: CHRISTMAS GROUP HOMES

ADMINISTRATOR: SUSAN CHRISTMAS

7617 NORTH 181ST AVENUE, WADDELL AZ 85355

(623) 262-4238

FAX: (623) 444-4491

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TEMPE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-61 # BEDS: 5**NAME:** BLUE SKY

2120 EAST EL PARQUE, TEMPE AZ 85282

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.**ADMINISTRATOR:** ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TEMPE

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL39-54 # BEDS: 6**NAME:** ELLIS

2127 EAST ELLIS, TEMPE AZ 85282

(623) 931-9300

FAX: (623) 931-9822

OWNER/OPERATOR: FAMILY SUPPORT RESOURCES, INC.**ADMINISTRATOR:** ALTA DOUGLASS

5800 WEST GLENN DRIVE #200, GLENDALE AZ 85301

(623) 931-9300

FAX: (623) 931-9822

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: **THATCHER**

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: **CWL208-467** **# BEDS:** 15

NAME: **GILA VALLEY CHILDREN'S HOME**
411 SOUTH ARENA WAY, THATCHER AZ 85552
(520) 417-2115
FAX: (520) 417-2114

OWNER/OPERATOR: MARY'S MISSION & DEVELOPMENTAL CENTER

ADMINISTRATOR: WILLIAM LACEY JR.
345 TAYLOR DRIVE, SIERRA VISTA AZ 85635
(520) 417-2115
FAX: (520) 417-2114
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL81-91 # BEDS: 20

NAME: AMPARO GROUP HOME
1320 EAST BLACKLIDGE, TUCSON AZ 85719
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.

ADMINISTRATOR: DAVID BRADLEY
880 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 750-9667
FAX: (520) 750-0056
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL28-88 # BEDS: 8

NAME: ANGEL HOUSE

1310 NORTH SPEEDWAY PLACE, TUCSON AZ 85710

(520) 721-1887

FAX: (520) 721-0069

OWNER/OPERATOR: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT

ADMINISTRATOR: DAVID GILES, PH.D

7820 EAST BROADWAY #100, TUCSON AZ 85731

(520) 721-1887

FAX: (520) 721-0069

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL59-27 # BEDS: 58

NAME: ANGEL NURSEY
1101 NORTH 4TH AVENUE, TUCSON AZ 85705
(520) 624-5600
FAX: (520) 623-2443

OWNER/OPERATOR: CASA DE LOS NINOS

ADMINISTRATOR: SUSIE HUHN
1101 NORTH 4TH AVENUE, TUCSON AZ 85705
(520) 624-5600
FAX: (520) 623-2443
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH446 # **BEDS:** 24
NAME: ARIZONA'S CHILDREN ASSOCIATION
2700 SOUTH 8TH AVENUE, TUCSON AZ 85713
(520) 622-7611
FAX: (520) 624-4885

OWNER/OPERATOR: ARIZONA'S CHILDREN ASSOCIATION
ADMINISTRATOR: SELSOR, LINDA
2700 SOUTH 8TH AVENUE, TUCSON AZ 85713
(520) 622-7611
FAX: (520) 624-4885
EMAIL: FCHAFFEE@ARIZONASCHILDREN.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL115-510 # BEDS: 6

NAME: BARNES GROUP HOME

3571 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

OWNER/OPERATOR: VISIONQUEST NATIONAL, LTD.

ADMINISTRATOR: ANTHONY ZASA

3571 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL115-434 # BEDS: 10

NAME: BLUE HORSE HOUSE

3501 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

OWNER/OPERATOR: VISIONQUEST NATIONAL, LTD.

ADMINISTRATOR: ANTHONY ZASA

3571 EAST RIVER ROAD, TUCSON AZ 85718

(520) 795-5961

FAX: (520) 299-8868

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-482 # BEDS: 7

NAME: BOSCO HOUSE
1405 EAST GRANT ROAD, TUCSON AZ 85719
(520) 292-0270
FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.

ADMINISTRATOR: DR. HAROD "SKIP" MCGROGAN
3200 NORTH LOS ALTOS, TUCSON AZ 85705
(520) 292-0270
FAX: (520) 887-8722

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL67-42 # BEDS: 10**NAME:** CALLE LOMA LINDA

8961 NORTH CALLE LOMA LINDA, TUCSON AZ 85737

(520) 797-3130

FAX: (520) 797-7957

OWNER/OPERATOR: D'AMORE GROUP HOME**ADMINISTRATOR:** JANE AND DOUG D'AMORE

2650 WEST NARANJA DRIVE, TUCSON AZ 85742

(520) 797-3130

FAX: (520) 797-7957

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-169 # BEDS: 16**NAME:** CARE BEAR HOME

3200 NORTH LOS ALTOS, TUCSON AZ 85705

(520) 292-0270

FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.**ADMINISTRATOR:** DR. HAROD "SKIP" MCGROGAN

3200 NORTH LOS ALTOS, TUCSON AZ 85705

(520) 292-0270

FAX: (520) 887-8722

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1941 # BEDS: 10

NAME: CASA DE TUCSON
3700 WEST GAILEY DRIVE, TUCSON AZ 85741
(520) 572-0404
FAX: (520) 572-0776

OWNER/OPERATOR: CASA DE TUCSON

ADMINISTRATOR: HOWARTH, ANNE
3700 WEST GAILEY DRIVE, TUCSON AZ 85741
(520) 572-0404
FAX: (520) 572-0776

EMAIL: ANNEHOWARTH1@AOL.COM

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-173 # BEDS: 8**NAME:** CATALINA AVE
1148 NORTH CATALINA AVENUE, TUCSON AZ 85712
(520) 292-0270
FAX: (520) 887-8722**OWNER/OPERATOR:** THOSE WHO CARE, INC.**ADMINISTRATOR:** DR. HAROD "SKIP" MCGROGAN
3200 NORTH LOS ALTOS, TUCSON AZ 85705
(520) 292-0270
FAX: (520) 887-8722

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-177 # BEDS: 5

NAME: CHILDREN'S VILLAGE # 1

3113 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY

ADMINISTRATOR: DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-174 # BEDS: 6**NAME:** CHILDREN'S VILLAGE # 2

3136 EAST LEE, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY**ADMINISTRATOR:** DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-175 # **BEDS:** 6
NAME: **CHILDREN'S VILLAGE # 3**
 1550 NORTH COUNTRY CLUB ROAD, TUCSON AZ 85716
 (520) 322-9557
 FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY
ADMINISTRATOR: DON STRAUCH
3127 EAST ADAMS, TUCSON AZ 85716
(520) 322-9557
FAX: (520) 322-5864
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY
CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-176 # BEDS: 4

NAME: CHILDREN'S VILLAGE # 4

3128 EAST LEE #1 & #2, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY

ADMINISTRATOR: DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-178 # BEDS: 5

NAME: CHILDREN'S VILLAGE # 5

3114 EAST LEE STREET, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY

ADMINISTRATOR: DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-240 # BEDS: 7

NAME: CHILDREN'S VILLAGE # 6

8055 EAST BROADWAY, TUCSON AZ 85710

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY

ADMINISTRATOR: DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL113-473 # BEDS: 5**NAME:** CHILDRENS VILLAGE #8

3120 EAST ADAMS ST., TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

OWNER/OPERATOR: TUCSON METROPOLITAN MINISTRY**ADMINISTRATOR:** DON STRAUCH

3127 EAST ADAMS, TUCSON AZ 85716

(520) 322-9557

FAX: (520) 322-5864

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL81-94 # BEDS: 3**NAME:** COLLYER GROUP HOME

3019 NORTH WINSTEL BLVD., TUCSON AZ 85716

(520) 750-9667

FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.**ADMINISTRATOR:** DAVID BRADLEY

880 SOUTH CRAYCROFT, TUCSON AZ 85711

(520) 750-9667

FAX: (520) 750-0056

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL22-196 # BEDS: 10

NAME: DEVEREUX ENSUENO
100 NORTH CAMINO SECO, TUCSON AZ 85710
(520) 296-5551
FAX: (520) 886-3335

OWNER/OPERATOR: DEVEREUX OF ARIZONA

ADMINISTRATOR: JAMES M. COLE
6141 EAST GRANT ROAD, TUCSON AZ 85712
(520) 296-5551
FAX: (520) 886-3335
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL22-44 # BEDS: 10**NAME:** DEVEREUX VALOR

961 NORTH CAMINO MIRAMONTE, TUCSON AZ 85712

(520) 296-5551

FAX: (520) 886-3335

OWNER/OPERATOR: DEVEREUX OF ARIZONA**ADMINISTRATOR:** JAMES M. COLE

6141 EAST GRANT ROAD, TUCSON AZ 85712

(520) 296-5551

FAX: (520) 886-3335

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL81-95 **# BEDS:** 5

NAME: DIAMONDBACK II GROUP HOME
1662 NORTH ROSEMONT AVENUE, TUCSON AZ 85711
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.

ADMINISTRATOR: DAVID BRADLEY
880 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 750-9667
FAX: (520) 750-0056
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-168 # BEDS: 17

NAME: DOMINIC SHELTER
3340 NORTH EL MORAGA, TUCSON AZ 85745
(520) 292-0270
FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.

ADMINISTRATOR: DR. HAROD "SKIP" MCGROGAN
3200 NORTH LOS ALTOS, TUCSON AZ 85705
(520) 292-0270
FAX: (520) 887-8722
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL90-115 # BEDS: 7

NAME: FIFTH STREET SHELTER

4751 EAST LINDEN, TUCSON AZ 85712

(520) 670-9040

FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.

ADMINISTRATOR: NANCY PANICO

630 EAST 9TH STREET, TUCSON AZ 85705

(520) 670-9040

FAX: (520) 670-1753

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-172 # BEDS: 7**NAME:** FLOWER HOME

22 NORTH WARREN, TUCSON AZ 85719

(520) 292-0270

FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.**ADMINISTRATOR:** DR. HAROD "SKIP" MCGROGAN

3200 NORTH LOS ALTOS, TUCSON AZ 85705

(520) 292-0270

FAX: (520) 887-8722

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL89-104 # BEDS: 10

NAME: HUMMINGBIRD HOME

10740 EAST TANQUE VERDE ROAD, TUCSON AZ 85749

(520) 760-2782

FAX: (520) 760-2785

OWNER/OPERATOR: OLD PUEBLO CHILDREN'S SERVICES, INC.

ADMINISTRATOR: TOM YOUNG

8825 EAST SPEEDWAY BLVD., SUITE 102, TUCSON AZ 85710

(520) 760-2782

FAX: (520) 760-2785

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY

AS OF DECEMBER 17, 2007

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1618 # **BEDS:** 6
NAME: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT
8551 EAST TANQUE VERDE ROAD, TUCSON AZ 85749
(520) 721-1887
FAX: (520) 721-0069

OWNER/OPERATOR: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT

ADMINISTRATOR: GILES, DAVID
P O BOX 17749, TUCSON AZ 85731
(520) 721-1887
FAX: (520) 721-0069
EMAIL: MUSTBINSUN@AOL.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1447 # BEDS: 7

NAME: KACHINA HOUSE

5626 EAST 2ND STREET, TUCSON AZ 85711

(520) 514-9888

FAX: (520) 514-9878

OWNER/OPERATOR: SUPPORTED LIVING SYSTEMS

ADMINISTRATOR: GRABILL, JAMES

925 SOUTH CRAYCROFT ROAD, TUCSON AZ 85711

(520) 514-9888

FAX: (520) 514-9878

EMAIL: JIMGRABILL@HOTMAIL.COM

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL89-243 # BEDS: 10

NAME: KING'S RANCH HOME

1660 NORTH KING STREET, TUCSON AZ 85749

(520) 760-2782

FAX: (520) 760-2785

OWNER/OPERATOR: OLD PUEBLO CHILDREN'S SERVICES, INC.

ADMINISTRATOR: TOM YOUNG

8825 EAST SPEEDWAY BLVD., SUITE 102, TUCSON AZ 85710

(520) 760-2782

FAX: (520) 760-2785

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-167 # BEDS: 6**NAME:** KINO HOUSE

1328 EAST 22ND STREET, TUCSON AZ 85713

(520) 292-0270

FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.**ADMINISTRATOR:** DR. HAROD "SKIP" MCGROGAN

3200 NORTH LOS ALTOS, TUCSON AZ 85705

(520) 292-0270

FAX: (520) 887-8722

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1712 # **BEDS:** 10
NAME: LA PALOMA FAMILY SERVICES INC/ DIAMONDBACK HOUSE
1654 NORTH ROSEMONT, TUCSON AZ 85712
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.
ADMINISTRATOR: BRADLEY, DAVID
P O BOX 41565, TUCSON AZ 85717
(520) 750-9667
FAX: (520) 750-0056
EMAIL: DAVLAPALOMAKIDS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH613 # **BEDS:** 9
NAME: LA PALOMA FAMILY SERVICES INC/ EVERGREEN FACILITY
4321 SOUTH EVERGREEN, TUCSON AZ 85730
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.
ADMINISTRATOR: BRADLEY, DAVID
P O BOX 41565, TUCSON AZ 85717
(520) 750-9667
FAX: (520) 750-0056
EMAIL: DAVLAPALOMAKIDS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2356 # **BEDS:** 10
NAME: LA PALOMA FAMILY SERVICES INC/ MENNINGER HOUSE
240 WEST NAVAJO ROAD, TUCSON AZ 85705
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.
ADMINISTRATOR: BRADLEY, DAVID
P O BOX 41565, TUCSON AZ 85717
(520) 750-9667
FAX: (520) 750-0056
EMAIL: DAVLAPALOMAKIDS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH612 # **BEDS:** 10
NAME: LA PALOMA FAMILY SERVICES INC/ TIMROD GROUP HOME
8400 EAST TIMROD STREET, TUCSON AZ 85710
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.
ADMINISTRATOR: BRADLEY, DAVID
P O BOX 41565, TUCSON AZ 85717
(520) 750-9667
FAX: (520) 750-0056
EMAIL: DAVLAPALOMAKIDS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1807 # **BEDS:** 10
NAME: LA PALOMA FAMILY SERVICES INC/ VICTORIA HOUSE
5457 EAST 6TH STREET, TUCSON AZ 85711
(520) 750-9667
FAX: (520) 750-0056

OWNER/OPERATOR: LA PALOMA FAMILY SERVICES, INC.
ADMINISTRATOR: BRADLEY, DAVID
870 WEST MIRACLE MILE, TUCSON AZ 85705
(520) 750-9667
FAX: (520) 750-0056
EMAIL: DAVLAPALOMAKIDS.ORG
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL89-106 # BEDS: 10

NAME: LAVELL HOME

10780 EAST TANQUE VERDE ROAD, TUCSON AZ 85749

(520) 760-2782

FAX: (520) 760-2785

OWNER/OPERATOR: OLD PUEBLO CHILDREN'S SERVICES, INC.

ADMINISTRATOR: TOM YOUNG

8825 EAST SPEEDWAY BLVD., SUITE 102, TUCSON AZ 85710

(520) 760-2782

FAX: (520) 760-2785

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL90-109 # BEDS: 10**NAME:** LOUIS SHELTER

1417 NORTH LOUIS AVENUE, TUCSON AZ 85712

(520) 670-9040

FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.**ADMINISTRATOR:** NANCY PANICO

630 EAST 9TH STREET, TUCSON AZ 85705

(520) 670-9040

FAX: (520) 670-1753

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH914 # BEDS: 7**NAME:** MERILAC LODGE

5138 EAST 2ND STREET, TUCSON AZ 85711

(520) 623-0344

FAX: (520) 770-8578

OWNER/OPERATOR: CATHOLIC COMMUNITY SERVICES OF SOUTHERN ARIZONA**ADMINISTRATOR:** DANKOWSKI, RONALD

140 WEST SPEEDWAY, SUITE #230, TUCSON AZ 85705

(520) 623-0344

FAX: (520) 770-8578

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2530 # BEDS: 10**NAME:** MIRASOL INC

1515 EAST KLEINDALE ROAD, TUCSON AZ 85719

(520) 546-3200

FAX: (520) 546-3205

OWNER/OPERATOR: JEANNE RUST**ADMINISTRATOR:** RUST-LESTER, JEANNE

7650 EAST BROADWAY BOULEVARD SUITE 303, TUCSON AZ 85710

(520) 546-3200

FAX: (520) 546-3205

EMAIL: MIRASOL03@MSN.COM

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL112-170 # BEDS: 6**NAME:** MOUNTAIN HOME

1303 EAST BROADWAY, TUCSON AZ 85716

(520) 292-0270

FAX: (520) 887-8722

OWNER/OPERATOR: THOSE WHO CARE, INC.**ADMINISTRATOR:** DR. HAROD "SKIP" MCGROGAN

3200 NORTH LOS ALTOS, TUCSON AZ 85705

(520) 292-0270

FAX: (520) 887-8722

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL28-87 # BEDS: 8**NAME:** NAVAJO HOUSE

1141 NORTH ARBOR CIRCLE, TUCSON AZ 85710

(520) 721-1887

FAX: (520) 721-0069

OWNER/OPERATOR: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT**ADMINISTRATOR:** DAVID GILES, PH.D

7820 EAST BROADWAY #100, TUCSON AZ 85731

(520) 721-1887

FAX: (520) 721-0069

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2114 # **BEDS:** 5
NAME: PASCUA YAQUI SOCIAL SERVICES/ YOEME KARI GRP HOME
2861 WEST VIA HACIENDA, TUCSON AZ 85741
(520) 297-6414
FAX: (520) 297-6415

OWNER/OPERATOR: PASCUA YAQUI TRIBE
ADMINISTRATOR: VALENCIA, IRMA
7474 SOUTH CAMINO DE OESTE, TUCSON AZ 85746
(520) 297-6414
FAX: (520) 297-6415
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL28-85 # BEDS: 6**NAME:** PIMA HOUSE

5035 EAST CECELIA STREET, TUCSON AZ 85711

(520) 721-1887

FAX: (520) 721-0069

OWNER/OPERATOR: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT**ADMINISTRATOR:** DAVID GILES, PH.D

7820 EAST BROADWAY #100, TUCSON AZ 85731

(520) 721-1887

FAX: (520) 721-0069

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL91-117 # BEDS: 8

NAME: REUNION SHELTER

3813 EAST 2ND STREET, TUCSON AZ 85716

(520) 323-1708

FAX: (520) 323-9077

OWNER/OPERATOR: OUR FAMILY SERVICES, INC.

ADMINISTRATOR: SUE KRAHE-EGGLESTO

3830 EAST BELLEVUE STREET, TUCSON AZ 85716

(520) 323-1708

FAX: (520) 323-9077

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL89-105 # BEDS: 10**NAME:** ROADRUNNER HOME

10760 EAST TANQUE VERDE ROAD, TUCSON AZ 85749

(520) 760-2782

FAX: (520) 760-2785

OWNER/OPERATOR: OLD PUEBLO CHILDREN'S SERVICES, INC.**ADMINISTRATOR:** TOM YOUNG

8825 EAST SPEEDWAY BLVD., SUITE 102, TUCSON AZ 85710

(520) 760-2782

FAX: (520) 760-2785

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-471 # BEDS: 5

NAME: ROLLER COASTER

1030 WEST ROLLER COASTER RD., TUCSON AZ 85704

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2869 # BEDS: 10**NAME:** SENDERO DE SONORA

2502 NORTH DODGE BOULEVARD #160, TUCSON AZ 85716

(520) 618-8901

FAX: (520) 618-8902

OWNER/OPERATOR: SENDERO DO SONORA**ADMINISTRATOR:** GREENE, GERALD

6050 NORTH CORONA ROAD, SUITE 160, TUCSON AZ 85704

(520) 618-8901

FAX: (520) 618-8902

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2615 # BEDS: 6

NAME: SIERRA HOUSE
5752 EAST WAVERLY, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878

OWNER/OPERATOR: RICHARD ECK

ADMINISTRATOR: GRABILL, JAMES
925 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878
EMAIL: JIMGRABILL@HOTMAIL.COM

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-76 # BEDS: 10

NAME: SPASH HOUSE 5
5850 NORTH ESCONDIDO, TUCSON AZ 85704
(520) 877-8077
FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS
14215 NORTH SKYHAWK, TUCSON AZ 85742
(520) 877-8077
FAX: (520) 887-0022
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-72 # BEDS: 10

NAME: SPLASH HOUSE 1

14265 NORTH SKYHAWK DRIVE, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-73 # BEDS: 7

NAME: SPLASH HOUSE 2
5535 NORTH ORACLE ROAD, TUCSON AZ 85704
(520) 877-8077
FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS
14215 NORTH SKYHAWK, TUCSON AZ 85742
(520) 877-8077
FAX: (520) 887-0022
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340
EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-74 # **BEDS:** 6
NAME: **SPLASH HOUSE 3**
 2571 WEST CALLE SENOR MANUEL, TUCSON AZ 85741
 (520) 877-8077
 FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES
ADMINISTRATOR: GREG AYERS
14215 NORTH SKYHAWK, TUCSON AZ 85742
(520) 877-8077
FAX: (520) 887-0022
EMAIL: UNAVAILABLE
FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY
CONTACT: BERTHA WINFIELD SECTION MANAGER
 (602) 347-6340
 EMAIL: BWINFIELD@AZDES.GOV
LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-75 # BEDS: 10

NAME: SPLASH HOUSE 4
1690 WEST SUNKIST ROAD, TUCSON AZ 85742
(520) 877-8077
FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS
14215 NORTH SKYHAWK, TUCSON AZ 85742
(520) 877-8077
FAX: (520) 887-0022
EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER
(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-77 **# BEDS:** 6

NAME: SPLASH HOUSE 6

4565 WEST LORD REDMAN LOOP, TUCSON AZ 85741

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-197 # BEDS: 10

NAME: SPLASH HOUSE 7

2601 WEST LAMBERT LANE, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-198 # BEDS: 8

NAME: SPLASH HOUSE 8

2064 WEST GRANITE SPRINGS PLACE, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES

ADMINISTRATOR: GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL74-435 # BEDS: 8**NAME:** SPLASH HOUSE 9

1970 WEST LEMONWOOD, TUCSON AZ 85737

(520) 877-8077

FAX: (520) 887-0022

OWNER/OPERATOR: GAP MINISTRIES**ADMINISTRATOR:** GREG AYERS

14215 NORTH SKYHAWK, TUCSON AZ 85742

(520) 877-8077

FAX: (520) 887-0022

EMAIL: UNAVAILABLE

*FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG***LICENSED BY:** AZ DEPT OF ECONOMIC SECURITY**CONTACT:** BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL105-153 # BEDS: 20

NAME: SPRINGBOARD

2350 WEST TANGERINE, TUCSON AZ 85737

(520) 292-2273

FAX: (520) 292-2257

OWNER/OPERATOR: TEEN CHALLENGE OF ARIZONA, INC.

ADMINISTRATOR: SNOW PEABODY

698 EAST WETMORE, SUITE 200, TUCSON AZ 85703

(520) 292-2273

FAX: (520) 292-2257

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1727 # BEDS: 6
NAME: SUPPORTED LIVING SYSTEMS INC/ AZTEC HOUSE
 5501 EAST 8TH STREET, TUCSON AZ 85711
 (520) 514-9888
 FAX: (520) 514-9878

OWNER/OPERATOR: SUPPORTED LIVING SYSTEMS
ADMINISTRATOR: GRABILL, JAMES
925 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878
EMAIL: JIMGRABILL@HOTMAIL.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
 (602) 364-2600
 EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1575 # **BEDS:** 6
NAME: SUPPORTED LIVING SYSTEMS INC/ PIMA HOUSE
3327 EAST BROADWAY BOULEVARD, TUCSON AZ 85716
(520) 514-9888
FAX: (520) 514-9878

OWNER/OPERATOR: SUPPORTED LIVING SYSTEMS

ADMINISTRATOR: GRABILL, JAMES
925 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878
EMAIL: JIMGRABILL@HOTMAIL.COM

FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH1883 # **BEDS:** 6
NAME: SUPPORTED LIVING SYSTEMS INC/ SAGUARO HOUSE
5120 EAST ALBERTA DRIVE, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878

OWNER/OPERATOR: RICHARD ECK
ADMINISTRATOR: GRABILL, JAMES
925 SOUTH CRAYCROFT, TUCSON AZ 85711
(520) 514-9888
FAX: (520) 514-9878
EMAIL: JIMGRABILL@HOTMAIL.COM
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE
CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL90-506 # BEDS: 12

NAME: TALP

1708 SOUTH VAN BUREN, TUCSON AZ 85711

(520) 670-9040

FAX: (520) 670-1753

OWNER/OPERATOR: OPEN INN, INC.

ADMINISTRATOR: NANCY PANICO

630 EAST 9TH STREET, TUCSON AZ 85705

(520) 670-9040

FAX: (520) 670-1753

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2948 # BEDS: 5**NAME:** THE BELL VIEW HOME

9140 EAST BELLEVUE STREET, TUCSON AZ 85715

(520) 409-3991

FAX: (520) 203-8547

OWNER/OPERATOR: THE BELL VIEW HOME**ADMINISTRATOR:** PONDECA, ALVARO

4951 EAST GRANT ROAD SUITE 105, TUCSON AZ 85712

(520) 409-3991

FAX: (520) 203-8547

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL91-504 **# BEDS:** 4

NAME: TRANSITIONAL LIVING PROGRAM
3809 EAST 2ND STREET, TUCSON AZ 85716
(520) 323-1708
FAX: (520) 323-9077

OWNER/OPERATOR: OUR FAMILY SERVICES, INC.

ADMINISTRATOR: SUE KRAHE-EGGLESTO
3830 EAST BELLEVUE STREET, TUCSON AZ 85716
(520) 323-1708
FAX: (520) 323-9077

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: TUCSON

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: CWL28-499 # BEDS: 12

NAME: ZIA APARTMENT

3240 EAST TOWNER STREET, TUCSON AZ 85716

(520) 721-1887

FAX: (520) 721-0069

OWNER/OPERATOR: INTERMOUNTAIN CENTERS FOR HUMAN DEVELOPMENT

ADMINISTRATOR: DAVID GILES, PH.D

7820 EAST BROADWAY #100, TUCSON AZ 85731

(520) 721-1887

FAX: (520) 721-0069

EMAIL: UNAVAILABLE

FACILITY INFO UPDATED ON 12-03/2007 BY BERTHA WINFIELD, SECTION MANAG

LICENSED BY: AZ DEPT OF ECONOMIC SECURITY

CONTACT: BERTHA WINFIELD SECTION MANAGER

(602) 347-6340

EMAIL: BWINFIELD@AZDES.GOV

LICENSE INFO UPDATED ON 12/3/2007 BY BERTHA WINFIELD (602) 347-6340

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: WILLCOX

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH2864 # BEDS: 5**NAME:** SUMMER HAWK

4197 EAST SHELTON ROAD, WILLCOX AZ 85643

(602) 424-1600

FAX: (602) 532-7202

OWNER/OPERATOR: AMERICAN INDIAN PREVENTION COALITION**ADMINISTRATOR:** BEACH, BONNY

PO BOX 25047, PHOENIX AZ 85002

(602) 424-1600

FAX: (602) 532-7202

EMAIL: NO E-MAIL ADDRESS

*FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600***LICENSED BY:** AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE**CONTACT:** ERNESTINA GONZALES

(602) 364-2600

EMAIL: GONZALA@HS.STATE.AZ.US

LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

**JUVENILE GROUP HOMES REGISTRY
AS OF DECEMBER 17, 2007**

MUNICIPALITY: YUMA

This report is published by the ADHS Division of Licensing. For assistance, contact ALS Behavioral Health Licensure, Phone (602) 674-4300; Fax (602) 861-0643.

FACILITY: BH505 # **BEDS:** 12
NAME: CHILD & FAMILY SERVICES OF YUMA INC
257 SOUTH 3RD AVENUE, YUMA AZ 85364
(928) 783-2427
FAX: (928) 783-0633

OWNER/OPERATOR: CHILD & FAMILY SERVICES OF YUMA, INC.

ADMINISTRATOR: BOOTHBY, TERI
257 SOUTH 3RD AVENUE, YUMA AZ 85364
(928) 783-2427
FAX: (928) 783-0633
EMAIL: NO E-MAIL ADDRESS
FACILITY INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600

LICENSED BY: AZ DEPT HEALTH SVCS/ADHS OBHL LICENSURE

CONTACT: ERNESTINA GONZALES
(602) 364-2600
EMAIL: GONZALA@HS.STATE.AZ.US
LICENSE INFO UPDATED ON 12/17/2007 BY ERNESTINA GONZALES (602) 364-2600